PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Stop ISSUE FEE Commissioner for Patents

P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as

indicated unless correct maintenance fee notifica	ted below or directed of	herwise in Block 1, by (a) specifying a new corn	espondence address;	and/or (b) indicating a sepa	arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
201	201 7590 02/01/2008					
UNILEVER INTELLECTUAL PROPERTY GROUP 700 SYLVAN AVENUE, BLDG C2 SOUTH				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.		
ENGLEWOOD	CLIFFS, NJ 07632	-3100				(Depositor's name)
						(Signature)
						(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTO	R	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/645,885	08/21/2003		Paul Roland Bergquis		J6819(C)	8190
	·	D TEXTILE AND USE I				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUI	PREV. PAID ISSUE	FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1440	\$300	\$0	\$1740	05/01/2008
EXAMINER		ART UNIT	CLASS-SUBCLASS			
	QUEZ, NORCA LIZ	1794	442-408000	***************************************		
 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Location of Correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			2. For printing on the patent front page, list (i) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
PLEASE NOTE: Un recordation as set for (A) NAME OF ASSI Unilever Ho Division of	less an assignee is ident th in 37 CFR 3.11. Comp GNEE come & Personal f Conopco, Inc	Care USA,	data will appear on the T a substitute for filing a (B) RESIDENCE: (CIT	patent. If an assignent assignment, assignment, and STATE OR C	,	
Please check the appropr	riate assignee category or	categories (will not be pr	rinted on the patent):	Individual XX Co.	rporation or other private gro	oup entity Government
☑ Issue Fee ☑ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-1155 (enclose an extra copy of this form).			
	s SMALL ENTITY state	is. See 37 CFR 1.27,	b. Applicant is no lo	nger claiming SMAL	L ENTITY status. See 37 Ci	FR 1.27(g)(2).
interest as shown by the			Office,	me appneam, a regis	tered attorney or agent; or th	ne assignce or other party in
Authorized Signature	_ Theto	n I Hony	BARRA	Date	April 16, 2008	
Typed or printed nam		on L. Honig U		Registration No		
This collection of inform an application. Confiden submitting the complete this form and/or suggest Box 1450, Alexandria, V Alexandria, Virginia 223	nation is required by 37 C tiality is governed by 35 d application form to the ions for reducing this but firginia 22313-1450. DC 13-1450.	FR 1.311. The informatic U.S.C. 122 and 37 CFR USPTO. Time will vary rden, should be sent to th O NOT SEND FEES OR (on is required to obtain of 1.14. This collection is education of the depending upon the induction office COMPLETED FORMS	retain a benefit by the stimated to take 12 m ividual case. Any concer, U.S. Patent and 1 O THIS ADDRESS.	ne public which is to file (ancimutes to complete, including the ments on the amount of tire (ademark Office, U.S. Depa SEND TO: Commissioner for the complete of the commissioner for the commissione	by the USPTO to process) g gathering, preparing, and ne you require to complete urtment of Commerce, P.O. for Patents, P.O. Box 1450,

PTOL-85 (Rev. 08/07) Approved for use through 08/31/2010.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.